None of the remedies to political misinformation and voter ignorance are perfect, but they are worth trying

By Democratic Audit UK

Recent events in America show that voters are increasingly the victim of misinformation, especially over issues such as President Obama’s birth certificate and the Affordable Care Act. Here, Jennifer Hochschild and Katherine Levine Einstein show that misinformation is rife in America, and propose a number of smaller remedies to at least help improve voter literacy and counter ignorance.

It is painfully easy to demonstrate Americans’—and others’—ignorance about politically relevant facts. Fewer than one third of high school students in the United States knew in the 1980s which half century witnessed the American Civil War, and only two-thirds could find France on a map. In 2000, four out of five whites and nine out of ten blacks did not know what share of the American population was African American. Nor are residents of the United States unique in their political ignorance. In 2004, 45 percent of a nationally representative sample of Britons, including more than three fifths of those under age 35, had never heard of Auschwitz. And yet, to quote Horace Mann – only one of the many authorities who have made the same point – an educated public “is requisite for the faithful and conscientious discharge of all those duties which devolve upon the inheritor of a portion of the sovereignty of this great republic.”

Arguably even more problematic than political ignorance, and less well understood, is widely-shared misinformation. In our book, Do Facts Matter? Information and Misinformation in American Politics, we use the case of the Affordable Care Act (ACA), among several others, to illustrate and explain the consequences of political misinformation. Repeated polls on the ACA, also known as Obamacare, enable one to trace the trajectory of misinformation over time. In April 2010, over half of American respondents agreed, appropriately, that they were
“confused” about the new law and that they lacked enough information “to understand how it would impact [them] personally” [all evidence on the ACA is from the Kaiser Family Foundation Health Tracking Polls]. Nonetheless, many already believed false information; up to a third—in most cases more than said “don’t know”- agreed that the ACA did not include various provisions that it in fact includes.

Over the next few years, the proportion of respondents making this type of mistake increased, as did the share of respondents claiming that the law does include provisions which in fact are not in it. Many provisions that respondents mistakenly thought were excluded—such as insurance coverage for young adults or for people with pre-existing conditions—appealed to them, and many provisions that respondents mistakenly thought were includes—such as death panels, cuts in Medicare, and insurance for undocumented immigrants—were deeply distasteful. Furthermore, compared with correctly informed survey respondents, more than twice as many of the misinformed told pollsters that they would vote against a member of Congress who supported the law. In combination, those patterns show that many of the misinformed held policy and political views antithetical to their own descriptions of their interests and preferences.

The most recent poll of March 2015 showed little change in the proportion of respondents misinformed about the ACA. A quarter still said that the law does not encourage expansion of Medicaid, and three tenths still said that it does not subsidize insurance coverage for the poor and near-poor. In June 2015, two-fifths incorrectly stated that the Supreme Court had not yet ruled on a challenge to the ACA, and 4 percent knew of the ruling but thought the dissenters had won.

Knowing a person’s political partisanship or ideology permits a fairly good prediction of whether they hold a given piece of wrong factual “knowledge” and correspondingly mistaken policy views. Well over half of Republicans, and just over half of conservatives, held false beliefs about the ACA in June 2010 and planned to vote in accord with their representative’s position on the law. Fewer than a quarter of independents, a tenth of Democrats, and only a few moderates and liberals were in the same analytical space.

Furthermore, this imbalance is not a matter of general ignorance; Republicans who hold false factual beliefs and are politically engaged around this issue are unusually well-educated. Democrats with a college degree are much less likely than less-educated Democrats to be mistaken about the ACA and to plan to use their views in their vote choice. In contrast, Republicans with a college degree are much more likely than those without to be mistaken about the ACA and to plan to use their views in their vote choice. Fully three-fifths of well-educated Republicans are in that group.

We cannot say whether highly educated Republicans oppose the ACA and its proponents because they are misinformed, or are misinformed because they oppose the ACA and its proponents, or are both misinformed and opposed because of some other reason such as fear. But we can point to a large number of Americans whose good schooling has not inoculated them against holding and using mistaken understandings.

Finding strong correlations among partisanship, information, and policy preferences is hardly novel in political science. However, these interconnections matter politically in ways that were insufficiently explored before we published Do Facts Matter?, because they create strong incentives for politicians to discourage abandonment of misinformation in favour of correct knowledge. That is, citizens’ political use of misinformation creates an asymmetry among political activists.

Consider the use of misinformation from a politician’s vantage point. A potential voter who is misinformed but holds policy or political views that accord with his or her misinformation is in a very stable state. The person “knows” something important, uses this “knowledge,” and is connected with a political party and leaders who reinforce, or at least seldom contradict, this “knowledge.” Many of the person’s friends or members of the group with which he or she identifies probably concur with it. Furthermore, inertia is powerful, so a change in political views is always less likely than persistence. To persuade this potential voter to reject false knowledge, change policy views, disagree with friends, perhaps abandon leaders or even a political party, requires an enormous amount of effort and
resources – inevitably in short supply in a political campaign.

Thus leaders of one political party – Democrats in the case of the ACA – have little incentive to try to persuade people holding and using factual misinformation to change their minds and behaviours. Conversely, leaders of the other political party – Republicans in this case – have a powerful incentive to keep individuals misinformed and active, or at least no reason to try very hard to inform them that they are wrong. As the political consultant Lee Atwater is supposed to have said, “Politics and facts don’t belong in the same room.”

This logic extends beyond the case of health insurance. Do Facts Matter? uses a variety of cases – global warming, Justice Clarence Thomas’ confirmation hearings, weapons of mass destruction in Iraq, President Clinton’s affair with Monica Lewinski, opposition to childhood vaccination, the “birther” movement (the belief that President Obama was born outside the United States), and others—to show how the failure to use correct information in the political arena, and especially the use of political misinformation, is damaging in a wide range of contexts. Do Facts Matter? also expands on the discussion of politicians’ incentives to foster, or at least not correct, voters’ active use of political misinformation.

The issue should matter to many people beyond frustrated professors of political science; using political misinformation in elections and policy making can lead to deaths in a way that “mere” political ignorance seldom does. After all, Americans who mistakenly accepted politicians’ insistence that Iraq harbored weapons of mass destruction were especially likely in 2003 to endorse a war in which hundreds of thousands were killed. More insidiously, the active use of misinformation can undermine democratic governance, by inhibiting the “faithful and conscientious discharge of all those duties which devolve upon the inheritor of a portion of the sovereignty of [a] great republic.”

Luckily, there are some responses, which we explore in some detail in Do Facts Matter? The book discusses ways of dealing with misinformation that range from education (in classrooms, the media, or even blog posts), “nudges,” political activism, and fact checkers, through reliance on experts to make decisions, all the way to policy mandates that reject popular preferences. As Do Facts Matter? points out, none of these responses are fully effective and all are weak in the face of a stable, gratifying intersection among false information, corresponding policy views, connection with like-minded others, and reinforcing politicians. But at least they are worth trying.

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Jennifer Hochschild is Henry LaBarre Jayne Professor of Government and Professor of African and African American Studies at Harvard University

Katherine Levine Einstein is Assistant Professor at Boston University